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WOODS & AITKEN
L • L • P

DOCKET FILE COPY ORIGINAL

DENVER OFFICE
SUITE 525
8055 EAST TUFTS AVENUE
DENVER, COLORADO 80237-2835
TELEPHONE 303-606-6700
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OMAHA OFFICE
SUITE 525
10250 REGENCY CIRCLE
OMAHA, NEBRASKA 68114-3754
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THOMAS J. MOORMAN
DIRECT: (202) 944-9502
EMAIL: TMOORMAN@WOODSAITKEN.COM
WWW.WOODSAITKEN.COM
ADMITTED TO PRACTICE ONLY IN THE DISTRICT OF COLUMBIA

PLEASE RESPOND TO WASHINGTON ADDRESS

WASHINGTON OFFICE
SUITE 310
5151 WISCONSIN AVENUE, N.W.
WASHINGTON, D.C. 20016-4124
TELEPHONE 202-944-9500
FAX 202-944-9501

June 25, 2014

REDACTED – FOR PUBLIC INSPECTION

ORIGINAL

HAND DELIVERED

Ms. Marlene H. Dortch
Secretary
Federal Communications Commission
445 12th Street, NW
Washington, DC 20554

ACCEPTED/FILED

JUN 25 2014

Federal Communications Commission
Office of the Secretary

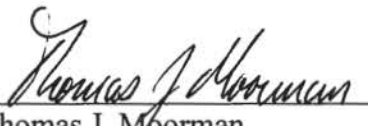
**Re: WC Docket No. 10-90
WC Docket No. 11-42
Submission of Redacted Version of FCC Form 481 and Five Year Plan for
Armstrong Telephone Company – New York (Study Area Code 150071)**

Dear Ms. Dortch:

Attached for filing is one copy of the redacted public version of (1) the FCC Form 481 of Armstrong Telephone Company – New York (the “Company”) which contains the Company’s initial Section 54.202(a)(1)(ii) five-year plan required by Section 54.313 of the Commission’s rules.

The Company’s FCC Form 481 has been electronically filed with the Universal Service Administrative Company. Consistent with 47 C.F.R. § 0.459 of the Commission’s Rules, the Company, under separate letter, has submitted the confidential version of the Company’s FCC Form 481 which contains the Company’s five-year plan.

Respectfully submitted,


Thomas J. Moorman
James A. Overcash
Counsel to Armstrong Telephone Company – New York

Attachment

No. of Copies rec'd 0+4
List ABCDE

**FCC Form 481 - Carrier Annual Reporting
Data Collection Form**

 FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code 150071

<015> Study Area Name ARMSTRONG TEL CO-NY

<020> Program Year 2015

<030> Contact Name: Person USAC should contact with questions about this data James W Ranko

<035> Contact Telephone Number: 7242830925 ext. 50342
Number of the person identified in data line <030>

<039> Contact Email Address: jranko@agoc.com
Email of the person identified in data line <030>

ACCEPTED/FILED
JUN 25 2014

 Federal Communications Commission
Office of the Secretary

ANNUAL REPORTING FOR ALL CARRIERS		54.313 Completion Required	54.422 Completion Required
(check box when complete)			
<100> Service Quality Improvement Reporting	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<200> Outage Reporting (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210> <input checked="" type="checkbox"/> <-- check box if no outages to report		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<300> Unfulfilled Service Requests (voice) 0		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<310> Detail on Attempts (voice)	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<320> Unfulfilled Service Requests (broadband) 0		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<330> Detail on Attempts (broadband)	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<400> Number of Complaints per 1,000 customers (voice)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<410> Fixed 0.434		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<420> Mobile 0.0		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<430> Number of Complaints per 1,000 customers (broadband)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<440> Fixed 0.0		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<450> Mobile 0.0		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<500> Service Quality Standards & Consumer Protection Rules Compliance	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510> 150071ny510.pdf	(attached descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600> Functionality in Emergency Situations	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610> 150071ny610.pdf	(attached descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700> Company Price Offerings (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<710> Company Price Offerings (broadband)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<800> Operating Companies and Affiliates	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900> Tribal Land Offerings (Y/N)?	(if yes, complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1000> Voice Services Rate Comparability	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1010> 150071ny1010.pdf	(attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1100> Terrestrial Backhaul (Y/N)?	(if not, check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1110>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1200> Terms and Condition for Lifeline Customers	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

<2000> (check to indicate certification)

<2005> (complete attached worksheet)

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000> (check to indicate certification)

<3005> (complete attached worksheet)

**(100) Service Quality Improvement Reporting
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	150071
<015>	Study Area Name	ARMSTRONG TEL CO-NY
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	James W Ranko
<035>	Contact Telephone Number - Number of person identified in data line <030>	7242830925 ext.50342
<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

<110> Has your company received its ETC certification from the FCC? (yes / no) ☐ ☒

If your answer to Line <110> is yes, do you have an existing §54.202(a) "5

<111> year plan" filed with the FCC? (yes / no) ☐ ☐

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

150071ny112.pdf

Name of Attached Document

Please check these boxes below to confirm that the attached documents(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

<113> Maps detailing progress towards meeting plan targets
 <114> Report how much universal service (USF) support was received
 <115> How (USF) was used to improve service quality
 <116> How (USF) was used to improve service coverage
 <117> How (USF) was used to improve service capacity
 <118> Provide an explanation of network improvement targets not met in the prior calendar year.

(200) Service Outage Reporting (Voice)
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	150071
-------	-----------------	--------

<015>	Study Area Name	ARMSTRONG TEL CO-NY
-------	-----------------	---------------------

<020>	Program Year	2015
-------	--------------	------

<030>	Contact Name - Person USAC should contact regarding this data	James W Ranko
-------	---	---------------

<035>	Contact Telephone Number - Number of person identified in data line <030>	7242830925 ext. 50342
-------	---	-----------------------

<039> Contact Email Address - Email Address of person identified in data line <030> jranko@agoc.com

<220>	<a>	<b1>	<b2>	<b3>	<b4>	<c1>	<c2>	<d>	<e>	<f>	<g>	<h>
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[illegible]

(700) Price Offerings Including Voice Rate Data
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<015>	Study Area Name	ARMSTRONG TEL CO-NY
-------	-----------------	---------------------

<030>	Contact Name - Person USAC should contact regarding this data	Jame
-------	---	------

<039>	Contact Email Address - Email Address of person identified in data line <030>	franko@aqoc.com
-------	---	-----------------

1/1/2014

<702> Single State-wide Residential Local Service Charge

[illegible]

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<D10>	Study Area Code	150071
<D15>	Study Area Name	ARMSTRONG TEL CO-NY
<D20>	Program Year	2015
<D30>	Contact Name - Person USAC should contact regarding this data	James W Ranko
<D35>	Contact Telephone Number - Number of person identified in data line <D30>	7242830925 ext. 5034
<D39>	Contact Email Address - Email Address of person identified in data line <D30>	jranko@agoc.com

[illegible]

(800) Operating Companies
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	150071
<015>	Study Area Name	ARMSTRONG TEL CO-NY
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	James W Ranko
<035>	Contact Telephone Number - Number of person identified in data line <030>	7242830925 ext.50342
<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com
<810>	Reporting Carrier	Armstrong Tel Co-NY
<811>	Holding Company	Armstrong Group of Companies
<812>	Operating Company	Armstrong Tel Co-NY

[illegible]

(900) Tribal Lands Reporting
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	150071
<015>	Study Area Name	ARMSTRONG TEL CO-NY
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	James W Ranko
<035>	Contact Telephone Number - Number of person identified in data line <030>	7242830925 ext.50342
<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select (Yes,No, NA)

**(1100) No Terrestrial Backhaul Reporting
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	150071
<015>	Study Area Name	ARMSTRONG TEL CO-NY
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	James W Ranko
<035>	Contact Telephone Number - Number of person identified in data line <030>	7242830925 ext.50342
<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

<1120> Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)

☐

<1130> Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)

☐

(1200) Terms and Condition for Lifeline Customers
Lifeline
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	150071
<015>	Study Area Name	ARMSTRONG TEL CO-NY
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	James W Ranko
<035>	Contact Telephone Number - Number of person identified in data line <030>	7242830925 ext.50342
<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

150071ny1210.pdf

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

Name of Attached Document

<1220> Link to Public Website

HTTP

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- <1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☒
- <1222> Details on the number of minutes provided as part of the plan, ☒
- <1223> Additional charges for toll calls, and rates for each such plan. ☒

(2000) Price Cap Carrier Additional Documentation

Data Collection Form

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	150071
<015>	Study Area Name	ARMSTRONG TEL CO-NY
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	James W Ranko
<035>	Contact Telephone Number - Number of person identified in data line <030>	7242830925 ext. 50342
<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@aqoc.com

CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

- <2010> 2nd Year Certification (47 CFR § 54.313(b)(1))
 <2011> 3rd Year Certification (47 CFR § 54.313(b)(2))

☐
☐

Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))

- <2012> 2013 Frozen Support Certification
 <2013> 2014 Frozen Support Certification
 <2014> 2015 Frozen Support Certification
 <2015> 2016 and future Frozen Support Certification

☐
☐
☐
☐

Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))

- <2016> Certification Support Used to Build Broadband

☐

Connect America Phase II Reporting (47 CFR § 54.313(e))

- <2017> 3rd year Broadband Service Certification
 <2018> 5th year Broadband Service Certification
 <2019> Interim Progress Certification
 <2020> Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

☐
☐
☐
☐

- <2021> Interim Progress Community Anchor Institutions

Name of Attached Document Listing Required Information

(3000) Rate Of Return Carrier Additional Documentation

Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010> Study Area Code	150071
<015> Study Area Name	ARMSTRONG TEL CO-NY
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	James W Ranko
<035> Contact Telephone Number - Number of person identified in data line <030>	7242830925 ext. 50342
<039> Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

- (3010) Progress Report on 5 Year Plan
Milestone Certification (47 CFR § 54.313(f)(1)(i))

Name of Attached Document Listing Required Information

- (3011) Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. ☐

- (3012) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))

Name of Attached Document Listing Required Information

- (3013) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))

(Yes/No)

☒ Yes ☒ No

- (3014) If yes, does your company file the RUS annual report

(Yes/No)

☒ Yes ☒ No

Please check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:

- (3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers) ☐
- (3016) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☐

- (3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

Name of Attached Document Listing Required Information

- (3018) If the response is no on line 3014, Is your company audited?

(Yes/No)

☒ Yes ☐ No

If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

- (3019) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications ☒

- (3020) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☒

- (3021) Management letter issued by the independent certified public accountant that performed the company's financial audit. ☒

If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

- (3022) Copy of their financial statement which has been subject to review by an independent certified public accountant; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers, ☐

- (3023) Underlying information subjected to a review by an independent certified public accountant ☐

- (3024) Underlying information subjected to an officer certification. ☐

- (3025) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☐

150071ny3026.pdf

- (3026) Attach the worksheet listing required information

Name of Attached Document Listing Required Information

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
---	--

<010> Study Area Code	150071
<015> Study Area Name	ARMSTRONG TEL CO-NY
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	James W Ranko
<035> Contact Telephone Number - Number of person identified in data line <030>	7242830925 ext.50342
<039> Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier: ARMSTRONG TEL CO-NY	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/24/2014
Printed name of Authorized Officer: James Ranko	
Title or position of Authorized Officer: Director - Regulatory Compliance	
Telephone number of Authorized Officer: 7242830925 ext.50342	
Study Area Code of Reporting Carrier: 150071	Filing Due Date for this form: 07/01/2014
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
---	--

<010> Study Area Code	150071
<015> Study Area Name	ARMSTRONG TEL CO-NY
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	James W Ranko
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<039> Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent: _____	
Name of Reporting Carrier: _____	
Signature of Authorized Officer: _____	Date: _____
Printed name of Authorized Officer: _____	
Title or position of Authorized Officer: _____	
Telephone number of Authorized Officer: ext. _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier: _____	
Name of Authorized Agent or Employee of Agent: _____	
Signature of Authorized Agent or Employee of Agent: _____	Date: _____
Printed name of Authorized Agent or Employee of Agent: _____	
Title or position of Authorized Agent or Employee of Agent: _____	
Telephone number of Authorized Agent or Employee of Agent: ext. _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Attachments

(700) Price Offerings Including Voice Rate Data
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	150071
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<015>	Study Area Name	ARMSTRONG TEL CO-NY
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<020> Program Year	2015
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<030>	Contact Name - Person USAC should contact regarding this data	James W Ranko
-------	---	---------------

<035> Contact Telephone Number - Number of person identified in data line <030> 7242830925 ext. 50342

<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com
-------	---	-----------------

1/1/2014

<702> Single State-wide Residential Local Service Charge

<703>

[illegible]

(710) Broadband Price Offerings Data Collection Form FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	150071
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<035>	Contact Telephone Number - Number of person identified in data line <030>	7242830925 ext. 50342
<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

[illegible]

(800) Operating Companies
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	150071
<015>	Study Area Name	ARMSTRONG TEL CO-NY
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<035>	Contact Telephone Number - Number of person identified in data line <030>	7242830925 ext.50342
<039>	Contact Email Address - Email Address of person identified in data line <030>	jranko@agoc.com

<810>	Reporting Carrier	Armstrong Tel Co-NY
<811>	Holding Company	Armstrong Group of Companies
<812>	Operating Company	Armstrong Tel Co-NY

[illegible]



ARMSTRONG[®]

TELEPHONE COMPANY - NEW YORK

ONE ARMSTRONG PLACE • BUTLER, PA 16001 • 724-283-0925 • Fax 283-9655

§54.313(a)(5) – COMPLIANCE WITH SERVICE QUALITY STANDARDS AND CONSUMER PROTECTION

Pursuant to 47 C.F.R. § 54.313(a)(5) and or 47 C.F.R. § 54.422(b)(3) Armstrong Telephone Company – New York ("the Company") is in compliance with appropriate FCC Service Quality Standards and Consumer Protection Rules. The Company provides CPNI training to all of its new employees and in addition trains all of its existing employees on an annual basis. The Company also conducts subscriber outreach regarding CPNI by periodically placing CPNI explanation messages into subscriber's bills and also has signage in its business office regarding CPNI rules and regulations. In addition the Company trains staff on Red Flag issues on an annual basis. All company employees are required to sign and acknowledge that they have completed CPNI and Red Flag training and understand obligations to adherence of applicable rules.

Name of Officer (Print) James D. Mitchell

Title: Vice President

Signature 

Date: 5/9/14



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§54.313(a)(6) – ABILITY TO FUNCTION IN EMERGENCY SITUATIONS

I am authorized to provide this certification on behalf of Armstrong Telephone Company- New York (the "Company"). I hereby certify that, to the best of my knowledge, the Company is capable of functioning in emergency situations. The Company has a reasonable amount of back-up power to ensure functionality of voice services without a commercial power source. The company's specific back-up power sources are, lead calcium batteries, gel cell batteries, fixed AC and DC natural/LP gas generators, fixed AC and DC gasoline/diesel generators and portable gasoline generators. The Company is able to reroute voice traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations. If there is a failure of the Company's main route, voice traffic is automatically rerouted to the back-up route.

Name of Officer (Print) James D. Mitchell

Title: Vice President

Signature 

Date: 5/9/14

Response to Line 1000
Armstrong Telephone Company – New York
Study Area 150071

Voice Services Comparability Report

Pursuant to 47 C.F.R. § 54.313 (a) (10) Armstrong Telephone Company – New York (the “Company”) is in compliance with the requirement that voice services is no more than two standard deviations above the national average urban rate for voice service of \$46.96 as specified in Public Notice DA 14-384 issued on March 20, 2014. The Company’s current total local end-user rate¹ of \$21.99 (which includes a local fee of \$21.99, mandated state fees of 0.00 and mandatory extended area service charges of \$0.00) is not above the standard deviation as specified in the USF/ICC Transformation Order.²

¹ Local End User Rate as defined in USF/ICC Transformation Order 26 FCC Rcd at 17751, Para. 238

² USF/ICC Transformation Order, 26 FCC Rcd at 17694, Para. 84 (footnote included) “The standard deviation is a measure of dispersion. The sample standard deviation is the square root of the sample variance. The sample variance is calculated as the sum of the squared deviations of the individual observations in the sample of data from the sample average divided by the total number of observations in the sample minus one. In a normal distribution, about 68 percent of the observations lie within one standard deviation above and below the average and about 95 percent of the observations lie within two standard deviations above and below the average.”



Initial Five-Year Service Quality Improvement Plan – 47 C.F.R. §54.202(a)

Voice Network Upgrades : 2015

Voice Network Upgrades : 2016

Project Description	Area Served/Wire center	Estimated Start Date	Estimated Completion Date	Estimated Population Served	Estimated Capital Costs
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Grand Total				[REDACTED]	[REDACTED]



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Telephone Company - New York

Initial Five-Year Service Quality Improvement Plan – 47 C.F.R. §54.202(a)

COMPANY submits initial five-year build-out Service Quality Improvement plan pursuant to C.F.R. §54.202(a)(1)(ii) that specifies proposed improvements or upgrades to the COMPANY's network throughout its service area. In addition, COMPANY is providing information that includes an estimate of the population that will be serviced as a result of these improvements. The receipt of USF support, combined with other funding sources will allow COMPANY to continue to meet its broadband obligations within its service area, complete service request within a reasonable amount of time, provide reliable, state-of-the-art, high-quality voice and broadband service, to its rural customers in four exchanges. The projects listed within this plan will be used to improve or upgrade the network over the next five years:

Voice Network Upgrades : 2017

Project Description	Area Served/Wire center	Estimated Start Date	Estimated Completion Date	Estimated Population Served	Estimated Capital Costs
Grand Total					

Voice Network Upgrades : 2018

Project Description	Area Served/Wire center	Estimated Start Date	Estimated Completion Date	Estimated Population Served	Estimated Capital Costs
Grand Total					



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Telephone Company - New York

Initial Five-Year Service Quality Improvement Plan – 47 C.F.R. §54.202(a)

COMPANY submits initial five-year build-out Service Quality Improvement plan pursuant to C.F.R. §54.202(a)(1)(ii) that specifies proposed improvements or upgrades to the COMPANY's network throughout its service area. In addition, COMPANY is providing information that includes an estimate of the population that will be serviced as a result of these improvements. The receipt of USF support, combined with other funding sources will allow COMPANY to continue to meet its broadband obligations within its service area, complete service request within a reasonable amount of time, provide reliable, state-of-the-art, high-quality voice and broadband service, to its rural customers in four exchanges. The projects listed within this plan will be used to improve or upgrade the network over the next five years:

Voice Network Upgrades : 2019

Project Description	Area Served/Wire center	Estimated Start Date	Estimated Completion Date	Estimated Population Served	Estimated Capital Costs
				Grand Total	

Broadband Upgrades : 2015

Project Description	Area Served/Wire center	Estimated Start Date	Estimated Completion Date	Estimated Population Served	Estimated Capital Costs
				Total	



ARMSTRONG

Telephone Company - New York

Initial Five-Year Service Quality Improvement Plan – 47 C.F.R. §54.202(a)

COMPANY submits initial five-year build-out Service Quality Improvement plan pursuant to C.F.R. §54.202(a)(1)(ii) that specifies proposed improvements or upgrades to the COMPANY's network throughout its service area. In addition, COMPANY is providing information that includes an estimate of the population that will be serviced as a result of these improvements. The receipt of USF support, combined with other funding sources will allow COMPANY to continue to meet its broadband obligations within its service area, complete service request within a reasonable amount of time, provide reliable, state-of-the-art, high-quality voice and broadband service, to its rural customers in four exchanges. The projects listed within this plan will be used to improve or upgrade the network over the next five years:

Broadband Upgrades : 2016

Project Description	Area Served/Wire center	Estimated Start Date	Estimated Completion Date	Estimated Population Served	Estimated Capital Costs
				Total	

Broadband Upgrades : 2017

Project Description	Area Served/Wire center	Estimated Start Date	Estimated Completion Date	Estimated Population Served	Estimated Capital Costs
				Total	